KOLAR Document ID: 1378398

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

Form ACO-1 November 2016 Form must be Typed Form must be Signed All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #	API No.:
Name:	Spot Description:
Address 1:	
Address 2:	Feet from North / South Line of Section
City: State: Zip:+	Feet from _ East / _ West Line of Section
Contact Person:	Footages Calculated from Nearest Outside Section Corner:
Phone: ()	□NE □NW □SE □SW
CONTRACTOR: License #	GPS Location: Lat:, Long:
Name:	(e.g. xx.xxxxxx) (e.gxxx.xxxxxx)
Wellsite Geologist:	Datum: NAD27 NAD83 WGS84
Purchaser:	County:
Designate Type of Completion:	Lease Name: Well #:
New Well Re-Entry Workover	Field Name:
	Producing Formation:
☐ Oil ☐ WSW ☐ SWD	Elevation: Ground: Kelly Bushing:
☐ Gas ☐ DH ☐ EOR	Total Vertical Depth: Plug Back Total Depth:
☐ OG ☐ GSW	Amount of Surface Pipe Set and Cemented at: Feet
CM (Coal Bed Methane)	
Cathodic Other (Core, Expl., etc.):	Multiple Stage Cementing Collar Used?
If Workover/Re-entry: Old Well Info as follows:	If yes, show depth set: Feet
Operator:	If Alternate II completion, cement circulated from:
Well Name:	feet depth to:w/sx cmt.
Original Comp. Date: Original Total Depth:	
☐ Deepening ☐ Re-perf. ☐ Conv. to EOR ☐ Conv. to SWD	Drilling Fluid Management Plan
☐ Plug Back ☐ Liner ☐ Conv. to GSW ☐ Conv. to Producer	(Data must be collected from the Reserve Pit)
Described	Chloride content: ppm Fluid volume: bbls
☐ Commingled Permit #:	Dewatering method used:
SWD Permit #:	Location of fluid disposal if hauled offsite:
EOR Permit #:	Location of fluid disposal if flauled offsite.
GSW Permit #:	Operator Name:
	Lease Name: License #:
Spud Date or Date Reached TD Completion Date or	Quarter Sec TwpS. R
Recompletion Date Recompletion Date	County: Permit #:

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY				
Confidentiality Requested				
Date:				
Confidential Release Date:				
Wireline Log Received Drill Stem Tests Received				
Geologist Report / Mud Logs Received				
UIC Distribution				
ALT I II III Approved by: Date:				

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Page Two

Operator Name:				Lease Name:			Well #:	
Sec Twp.	S. R.	Ea	ast West	County:				
INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed.								
Final Radioactivity files must be subm						iled to kcc-well-lo	gs@kcc.ks.gov	v. Digital electronic log
Drill Stem Tests Ta			Yes No			on (Top), Depth ar		Sample
Samples Sent to G	Geological Surv	ey	Yes No	Na	me		Тор	Datum
Cores Taken Electric Log Run Geolgist Report / M List All E. Logs Ru	_		Yes No Yes No Yes No					
		R	CASING eport all strings set-o		New Used	on, etc.		
Purpose of Strin		Hole	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
			ADDITIONAL	CEMENTING / SO	UEEZE RECORD			
Purpose:		epth T	ype of Cement	# Sacks Used		Type and F	Percent Additives	
Perforate Protect Casii	ng							
Plug Back TI Plug Off Zon								
 Did you perform a Does the volume of 	-	-		t exceed 350,000 ga	☐ Yes Ilons? ☐ Yes	No (If No, sk	ip questions 2 an ip question 3)	d 3)
3. Was the hydraulic	fracturing treatm	ent information sub	mitted to the chemic	al disclosure registr	/? Yes	No (If No, fill	out Page Three	of the ACO-1)
Date of first Production/Injection or Resumed Production/								
Estimated Production	on	Oil Bbls.					Gas-Oil Ratio	Gravity
Per 24 Hours								
DISPOS	DISPOSITION OF GAS: METHOD OF COMPLETION: PRODUCTION INTERVAL:					ON INTERVAL: Bottom		
	_	on Lease	Open Hole			nmingled mit ACO-4)	Тор	BOROTT
(If vented, Submit ACO-18.)								
Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid,	Fracture, Shot, Cer (Amount and Kind	menting Squeeze of Material Used)	Record
TUBING RECORD:	Size:	Set	At:	Packer At:				

Form	ACO1 - Well Completion
Operator	RJ Energy, LLC
Well Name	AJ BRADLEY 11-I
Doc ID	1378398

Casing

Purpose Of String	Size Hole Drilled	Size Casing Set	Weight		Type Of Cement		Type and Percent Additives
Surface	9.875	7	17	20	portland	5	
Production	5.625	2.875	6.5	630	portland	75	

HAMMERSON CORPORATION

PO BOX 189 GAS, KS 66742

Invoice

Date	Invoice #
10/16/2017	11499

Bill To

R.J. ENERGY LLC 22082 NE NEOSHO RD GARNETT, KS 66032

P.O. No.	Terms	Project
	Due on receipt	

Quantity	Description	Rate	Amount
75	WELL MUD (\$8.00 PER SACK) LINN COUNTY SALES TAX (WELL MUD) TRUCKING (\$50 PER HOUR) LINN COUNTY SALES TAX WELL BRADLEY 111	8.00 6.50% 50.00 6.50%	Amount 600.00 39.00 87.5 5.6
ank you for yo	our business.	Total	\$732.



RJ Energy

22082 NE Neosho Rd Garnett. Kansas 66032

AJ Bradley 11-I

			Start 10-6-17				
1	soil	1	Finish 10-9-17				
3	clay/gravel	4					
36	lime	40					
159	shale	199					
29	lime	228					
70	shale	298					
26	lime	324					
40	shale	364					
19	lime	383					
11	shale	394					
6	lime	400	set 20' of 7" w/5sxs Ran 630.5' 2 ¾				
94	shale	494	cemented to surface 75 sxs				
2	lime	496	contented to surface 75 sas				
68	shale	564					
21	sands shale	585					
3	bkn sand	588	good show				
6	oil sand	594	good show				
6	dk sand	600	show				
35	shale	635	TD				